Please type a plus sign (+) inside this box +

PTO/SB/121 (10-00) Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CORRESPONDENCE
ADDRESS
INDICATION FORM

Address to:

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Direct all correspondence to: Society Customer Number: 23117 Number Bar Label Here →									
Customer Number:									
Request for Customer Number (PTO/SB/125) submitted herewith. in the following listed application(s) or patent(s): Patent Number (if appropriate)	⊠ (Customer Number: 23117			7	Num	ber Bar	er	
in the following listed application(s) or patent(s): Patent Number (if appropriate)	OR						.,,,,,,		
in the following listed application(s) or patent(s): Patent Number (if appropriate)	Request for Customer Number (PTO/SB/125) submitted herewith.								
(if appropriate) Application Number (if appropriate) Date November 20, 2003 Applicant or Patentee Assignee of record of the entire interest. Statement under 37 C.F.R. § 3.73(b) is enclosed. (Form PTO/SB/96) Address of signer: Attorney or Agent of record 29,834 (Reg. No.) NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*									
Application Number (if appropriate) Date	Potent Number 11.0 Ellies								
Typed or Printed Name Robert A. Molan Check one									
Typed or Robert A. Molan Applicant or Patentee	(ιι αρριορι	idio)				эргорпас	<u> </u>		
Typed or Printed Name Signature Poblit A. Molan Applicant or Patentee	10,710,000						11010111201 20, 2000		
Typed or Printed Name Signature Poblit A. Molan Applicant or Patentee									
Typed or Printed Name Signature Poblit A. Molan Applicant or Patentee									
Typed or Printed Name Signature Poblit A. Molan Applicant or Patentee									
Typed or Printed Name Signature Poblit A. Molan Applicant or Patentee									
Typed or Printed Name Signature Poblit A. Molan Applicant or Patentee									
Typed or Printed Name Signature Poblit A. Molan Applicant or Patentee									
Typed or Printed Name Signature Poblit A. Molan Assignee of record of the entire interest. Statement under 37 C.F.R. § 3.73(b) is enclosed. (Form PTO/SB/96) Address of signer: 1100 North Glebe Road, 8 th Floor Arlington, VA 22201 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*									
Typed or Printed Name Signature Poblit A. Molan Applicant or Patentee									
Typed or Printed Name Signature Poblit A. Molan Applicant or Patentee									
Typed or Printed Name Signature Poblit A. Molan Applicant or Patentee									
Typed or Printed Name Signature Poblit A. Molan Assignee of record of the entire interest. Statement under 37 C.F.R. § 3.73(b) is enclosed. (Form PTO/SB/96) Address of signer: 1100 North Glebe Road, 8 th Floor Arlington, VA 22201 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*									
Typed or Printed Name Signature Poblit A. Molan Applicant or Patentee									
Signature Policit A. Molan Assignee of record of the entire interest. Statement under 37 C.F.R. § 3.73(b) is enclosed. (Form PTO/SB/96) Address of signer: 1100 North Glebe Road, 8 th Floor Arlington, VA 22201 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*							(check o	ne)	
Date February 8, 2005 Address of signer: 1100 North Glebe Road, 8 th Floor Arlington, VA 22201 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*		Robert A. Molan						Applicant or Patentee	
Date February 8, 2005 Address of signer: 1100 North Glebe Road, 8 th Floor Arlington, VA 22201 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*	Signature	Pobert A. Molan							
Address of signer: 1100 North Glebe Road, 8 th Floor Arlington, VA 22201 Attorney or Agent of record 29,834 (Reg. No.) NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*	Date						3.73(b) is enclosed. (Form		
Arlington, VA 22201 29,834 (Reg. No.) NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*	Address of signer: 1100 North Glebe Road, 8 th Floor						_	,	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*						\boxtimes	Attorney or Agent of record		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*	Anington, VA 22201							29 834	
than one signature is required, see below.*							_		
				cord of the entire in	terest or their re	presentati	ve(s) are re	quired. Submit multiple forms if more	
				· · · · · · · · · · · · · · · · · · ·					

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Assistant Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.